

MAY 12 1998

● To whom it may concern,

I believe that conservation is the smart solution to our terrible Bay Delta pollution, & extremely poisonous water.

It has been my experience that we really can't eat the fish we catch from the Delta without a high risk of toxic poisoning. The water that comes out of our tap is so full of chemicals & chlorine it's virtually undrinkable. We have to buy bottled water. There are signs ^{up} around town ^{how} the water may cause cancer & be hazardous to our health.

Please implement measures which do not include more canals, storage reservoirs, dredging or water diversion.

Instead, stop taxpayers from footing so much of the bill for large corporate farms. I support a solution that promotes water saving programs on our farms & cities.

● The only sustainable way to replenish the Bay & Delta is to use less water.

It's really a problem; hazardous to our health. Think of future generations. It'll only get

**INTERSTATE
INSURANCE
GROUP**

80 Grand Avenue
P. O. Box 720
Oakland, CA 94604
510/832-6696
800/234-2474

**Proof of Loss
Receipt & Release**

Claim No.

Policy No.

Company

Chicago Insurance Company
Interstate Indemnity Company
Member Companies of
The Fireman's Fund Insurance Group
Make

According to the terms and conditions of the Policy of Insurance identified above, the Company insures against loss to the automobile described in said Policy as follows:

Make	Year	Body Type	V.I.N.
------	------	-----------	--------

A loss caused by _____ occurred on the _____ day of _____, 19 _____

about the hour _____ m. the particulars of which are as follows:

The vehicle will be retained by: ☐ Company ☐ Insured

The loss described was not caused intentionally or otherwise by the design, procurement, or fraud of the Insured, nor by any agent or any other person acting for or on behalf of the Insured.

There is no other insurance in force as to this loss.

There is no lien, conditional sale contract, bailment lease, or other interest in the described automobile except:

Loss/Damage	Less Amount of Deductible	Other Deductions	Amount Claimed Due by the Insured
\$	\$	\$	\$

In consideration of the payment of _____ (\$ _____) the Insured hereby assigns, transfers and sets over to the Company any and all claims or causes of action of whatsoever kind and nature which the Insured now has, or may hereafter have, against any person or persons as the result of the occurrence and loss as described above, to the extent of the payment above made; the Insured agrees that the Company may enforce the same in such manner as shall be necessary or appropriate for the use and benefit of the Company, either in its own name or in the name of the Insured; that the Insured will furnish such papers, information, or evidence as shall be within the Insured's possession or control for the purpose of enforcing such claim, demand, or cause of action; and

The Insured understands and agrees that the furnishing of this form or the preparation thereof by any adjuster or agent of the Company is not a waiver of any rights of the said Company.

The Insured acknowledges receipt of the sum of _____ (\$ _____) and hereby releases and discharges the Company from any and all liability whatsoever for any claim under Policy No. _____ for the loss or damage described above and further acknowledges receipt of said amount in full satisfaction for all such claims or demands.

For your protection state law requires the following to appear on this form.

"(a) It is unlawful to: (1) Knowingly present or cause to be presented any false or fraudulent claim for the payment of a loss, including payment of a loss under a contract of insurance. (2) Knowingly present multiple claims for the same loss or injury, including presentation of multiple claims to more than one insurer, with an intent to defraud. (3) Knowingly cause or participate in a vehicular collision, or any other vehicular accident, for the purpose of presenting any false or fraudulent claim. (4) Knowingly prepare, make, or subscribe any writing, with intent to present or use the same, or to allow it to be presented in support of any such claim. (b) Every person who violates any provision of this section is punishable by imprisonment in the state prison, for two, three, or five years, or by fine not exceeding twenty-five thousand dollars (\$25,000), or by both."

The Insured acknowledges receipt of the sum of _____ (\$ _____) Paid under his direction as follows:

To _____ the sum of (\$ _____)

To _____ the sum of (\$ _____)

To _____ the sum of (\$ _____)

WITNESS: _____

INSURED

DATE: _____, 19 _____

INSURED

Worse if we don't do something smart now
by saving the Delta through Conservation.

Sincerely,

Paula Shea

35 Oakbrook Pl

Pittsburg CA

94565

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